

Fill in this information to identify your case:

Debtor 1 **Thomas Niles Gollick, Sr.**
First Name Middle Name Last Name

Debtor 2
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **MIDDLE DISTRICT OF PENNSYLVANIA, HARRISBURG DIVISION**

Case number **1:18-bk-03319**
(if known)

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- ☐ Married
☒ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1 Prior Address:

Dates Debtor 1 lived there

Debtor 2 Prior Address:

Dates Debtor 2 lived there

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.*)

- ☒ No
☐ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Part 2 Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No
☒ Yes. Fill in the details.

**For the calendar year before that:
 (January 1 to December 31, 2016)**

Debtor 1

Sources of income
 Check all that apply.

Gross income
 (before deductions and exclusions)

- ☒ Wages, commissions, bonuses, tips
☐ Operating a business

\$241.00

Debtor 2

Sources of income
 Check all that apply.

Gross income
 (before deductions and exclusions)

- ☐ Wages, commissions, bonuses, tips
☐ Operating a business

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

☐ No

☒ Yes. Fill in the details.

	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	2018 Social Security Benefits	\$14,749.00		
	07/20/2018 Federal Disability Arrearage Payment	\$15,624.00		
For last calendar year: (January 1 to December 31, 2017)	2017 Pension Benefits	\$6,000.00		
	2017 Social Security Benefits	\$24,792.00		
For the calendar year before that: (January 1 to December 31, 2016)	2016 Pension Benefits	\$34,581.00		
	2016 Social Security Benefits	\$32,925.00		
	2016 Unemployment Benefits	\$14,638.00		

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

☐ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☐ No. Go to line 7.

☒ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
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Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
Pennian Bank 2 N Main St Mifflintown, PA 17059-1003	05/18 \$500.00; 06/18 \$500.00; 07/18 \$500.00	\$1,500.00	\$89,567.00	<input checked="" type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other ____
Citizens One Auto Finance 1 Citizens Plz Providence, RI 02903-1344	07/18 \$636.54; 06/18 \$636.54; 05/18 \$636.54	\$1,909.62	\$7,506.76	<input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other ____
Bank of America PO Box 31785 Tampa, FL 33631-3785	05/10/18 \$900.00	\$900.00	\$7,825.28	<input checked="" type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other ____

7. **Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**
Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

- ☐ No
☒ Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Debtor's Mother	07/24/18	\$1,900.00	\$0.00	

8. **Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**
 Include payments on debts guaranteed or cosigned by an insider.

- ☒ No
☐ Yes. List all payments to an insider

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
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Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. **Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**
 List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☐ No
☒ Yes. Fill in the details.

Case title Case number	Nature of the case	Court or agency	Status of the case
Cavalry SPV I, LLC as assignee of Citibank NA v. Thomas N. Gollick Sr. 187-2018	Civil Action	Juniata County Court of Common Pleas 26 N Main St Mifflintown, PA 17059-1003	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?
Check all that apply and fill in the details below.

- ☐ No. Go to line 11.
☐ Yes. Fill in the information below.

Creditor Name and Address	Describe the Property Explain what happened	Date	Value of the property
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11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☐ No
☐ Yes. Fill in the details.

Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
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12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☐ No
☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☐ No
☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift and Address:			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☐ No
☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
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Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☐ No
☐ Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
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Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you

consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- ☐ No
- ☒ Yes. Fill in the details.

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
James P. Sheppard, Esquire 2201 N 2nd St Harrisburg, PA 17110-1007		07/27/2017	\$4,000.00

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- ☒ No
- ☐ Yes. Fill in the details.

Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
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18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☒ No
- ☐ Yes. Fill in the details.

Person Who Received Transfer Address	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person's relationship to you			

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called *asset-protection devices*.)

- ☒ No
- ☐ Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date Transfer was made
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Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No
- ☐ Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No
- ☐ Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
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22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☐ No
☐ Yes. Fill in the details.

Name of Storage Facility
Address (Number, Street, City, State and ZIP Code)

Who else has or had access to it?
Address (Number, Street, City, State and ZIP Code)

Describe the contents

Do you still have it?

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☐ No
☐ Yes. Fill in the details.

Owner's Name
Address (Number, Street, City, State and ZIP Code)

Where is the property?
(Number, Street, City, State and ZIP Code)

Describe the property

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- ☐ *Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- ☐ *Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- ☐ *Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☐ No
☐ Yes. Fill in the details.

Name of site
Address (Number, Street, City, State and ZIP Code)

Governmental unit
Address (Number, Street, City, State and ZIP Code)

Environmental law, if you know it

Date of notice

25. Have you notified any governmental unit of any release of hazardous material?

- ☐ No
☐ Yes. Fill in the details.

Name of site
Address (Number, Street, City, State and ZIP Code)

Governmental unit
Address (Number, Street, City, State and ZIP Code)

Environmental law, if you know it

Date of notice

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☐ No
☐ Yes. Fill in the details.

Case Title
Case Number

Court or agency
Name
Address (Number, Street, City, State and ZIP Code)

Nature of the case

Status of the case

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)

- ☐ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☐ An owner of at least 5% of the voting or equity securities of a corporation

☒ No. None of the above applies. Go to Part 12.

☐ Yes. Check all that apply above and fill in the details below for each business.

Business Name

Address

(Number, Street, City, State and ZIP Code)

Describe the nature of the business

Name of accountant or bookkeeper

Employer Identification number

Do not include Social Security number or ITIN.

Dates business existed

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

☒ No

☐ Yes. Fill in the details below.

Name

Address

(Number, Street, City, State and ZIP Code)

Date Issued

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Thomas Niles Gollick, Sr.

Thomas Niles Gollick, Sr.

Signature of Debtor 1

Signature of Debtor 2

Date July 27, 2018

Date _____

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)*?

☒ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of Person _____. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1	Thomas Niles Gollick, Sr.		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF PENNSYLVANIA, HARRISBURG DIVISION		
Case number (if known)	1:18-bk-03319		

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

		Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)		
1a. Copy line 55, Total real estate, from Schedule A/B.....	\$	107,550.00
1b. Copy line 62, Total personal property, from Schedule A/B.....	\$	28,406.22
1c. Copy line 63, Total of all property on Schedule A/B.....	\$	135,956.22

Part 2: Summarize Your Liabilities

		Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)		
2a. Copy the total you listed in Column A Amount of claim, at the bottom of the last page of Part 1 of Schedule D...	\$	133,122.45
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)		
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	\$	7,704.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	\$	32,124.77
Your total liabilities		\$ 172,951.22

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)		
Copy your combined monthly income from line 12 of Schedule I.....	\$	4,044.00
5. Schedule J: Your Expenses (Official Form 106J)		
Copy your monthly expenses from line 22c of Schedule J.....	\$	3,630.33

Part 4: Answer These Questions for Administrative and Statistical Records

6. **Are you filing for bankruptcy under Chapters 7, 11, or 13?**

☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

☒ Yes

7. **What kind of debt do you have?**

☒ **Your debts are primarily consumer debts.** Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Debtor 1 **Gollick, Thomas Niles Sr.**

Case number (if known) **1:18-bk-03319**

☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. *Check this box* and submit this form to the court with your other schedules.

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ **3,956.70**

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$ 0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ 7,704.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00
9d. Student loans. (Copy line 6f.)	\$ 0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ 0.00
9g. Total. Add lines 9a through 9f.	\$ 7,704.00

Fill in this information to identify your case and this filing:

Debtor 1	Thomas Niles Gollick, Sr.		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF PENNSYLVANIA, HARRISBURG DIVISION		
Case number	1:18-bk-03319		

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
- ☒ Yes. Where is the property?

1.1

158 Farm Dr

Street address, if available, or other description

Thompsontown PA 17094-8963

City State ZIP Code

Juniata

County

What is the property? Check all that apply

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other

Who has an interest in the property? Check one

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
\$143,100.00	\$71,550.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Tenancy in Common

☐ Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number:

Real estate at and known as 158 Farm Drive, Thompsontown, Juniata County, Pennsylvania 17094, used as residence. Property purchased for \$120,000.00 on January 16, 2014, CMA by Hower and Associates indicates a fair market value range, \$159,000.00 to \$179,000.00, Debtor believes the \$159,000.00 is accurate. That figure less 10% theoretical liquidation results in \$143,100.00, the fair market value indicated.

If you own or have more than one, list here:

1.2

1809 Willow Rd

Street address, if available, or other description

Carlisle PA 17013-1166

City State ZIP Code

Cumberland County

County

What is the property? Check all that apply

- ☐ Single-family home
☒ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Real estate at and known as 1809 Willow Road, Carlisle, Cumberland County, PA 17013, a property which had been sold on a sales agreement but which was abandoned and now remains in Debtor's name. Attached is a letter from Fred Noye, agent for Hower and Associates Realtors and he indicates that in its current state of disrepair it would be sold at \$30,000.00 to \$36,000.00. Debtor will surrender this property.

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$36,000.00

Current value of the portion you own?

\$36,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee Simple☐ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$107,550.00**Part 2: Describe Your Vehicles**

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
☒ Yes

3.1 Make: _____
 Model: _____
 Year: _____
 Approximate mileage: _____
 Other information: _____

**2013 Chevy Silverado Truck
 94,000 Miles - Fair Condition**

Who has an interest in the property? Check one

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$17,307.00

Current value of the portion you own?

\$17,307.00

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
☐ Yes

- 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$17,307.00**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?**Current value of the portion you own?**
Do not deduct secured claims or exemptions.**6. Household goods and furnishings***Examples:* Major appliances, furniture, linens, china, kitchenware☐ No☒ Yes. Describe.....**Refrigerator/Freezer \$150.00; Stove \$100.00; Dishwasher \$75.00; Table and Chairs \$100.00; TV \$50.00; Bed, Dresser, Chest of Drawers \$200.00; Filing Cabinet \$20.00; Recliner \$10.00; Tool Box with Tools \$100.00; Lawn Tractor \$500.00; Yard Tools \$40.00; Hand Tools \$100.00; Miscellaneous Household Goods and Furnishings \$150.00; Miscellaneous Decorations and Decor \$150.00****\$1,745.00****7. Electronics***Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games☐ No☒ Yes. Describe.....**Cell Phone****\$100.00****8. Collectibles of value***Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles☒ No☐ Yes. Describe.....**9. Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments☒ No☐ Yes. Describe.....**10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment☒ No☐ Yes. Describe.....**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories☐ No☒ Yes. Describe.....**Clothing and Wearing Apparel****\$150.00****12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver☐ No☒ Yes. Describe.....**Miscellaneous Jewelry****\$20.00****13. Non-farm animals***Examples:* Dogs, cats, birds, horses☒ No☐ Yes. Describe.....**14. Any other personal and household items you did not already list, including any health aids you did not list**☒ No☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$2,015.00**Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No☒ Yes.....**Cash and Coin**\$10.00**17. Deposits of money**

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No☒ Yes.....

Institution name:

17.1. **Checking Account** Checking Account-Joint\$9,074.22**18. Bonds, mutual funds, or publicly traded stocks**

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No☐ Yes.....

Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture☒ No☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☒ No☐ Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No☐ Yes. List each account separately.

Type of account:

Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No☐ Yes.

Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)☒ No☐ Yes.....

Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

- ☒ No
☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

- ☒ No
☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

- ☒ No
☐ Yes. Give specific information about them...

Money or property owed to you?

**Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.

28. Tax refunds owed to you

- ☒ No
☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

- ☒ No
☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- ☒ No
☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

- ☒ No
☐ Yes. Name the insurance company of each policy and list its value.
Company name:

Beneficiary:

Surrender or refund
value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- ☒ No
☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

- ☒ No
☐ Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

- ☒ No
☐ Yes. Describe each claim.....

35. Any financial assets you did not already list

- ☒ No
☐ Yes. Give specific information..

Debtor 1 Gollick, Thomas Niles Sr.Case number (if known) 1:18-bk-03319

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$9,084.22**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

37. Do you own or have any legal or equitable interest in any business-related property?

- ☒ No. Go to Part 6.
☐ Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.

If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.
☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

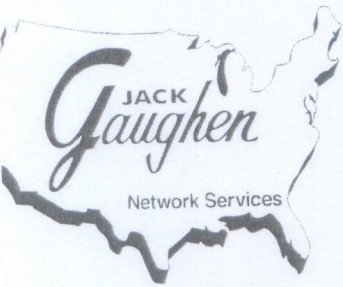
Examples: Season tickets, country club membership

- ☒ No
☐ Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00**Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2		<u>\$107,550.00</u>
56. Part 2: Total vehicles, line 5	<u>\$17,307.00</u>	
57. Part 3: Total personal and household items, line 15	<u>\$2,015.00</u>	
58. Part 4: Total financial assets, line 36	<u>\$9,084.22</u>	
59. Part 5: Total business-related property, line 45	<u>\$0.00</u>	
60. Part 6: Total farm- and fishing-related property, line 52	<u>\$0.00</u>	
61. Part 7: Total other property not listed, line 54	<u>\$0.00</u>	
	+	
62. Total personal property. Add lines 56 through 61...	<u>\$28,406.22</u>	Copy personal property total <u>\$28,406.22</u>
63. Total of all property on Schedule A/B. Add line 55 + line 62		<u>\$135,956.22</u>



Hower & Associates

24052 Route 35 North ♦ Mifflintown, PA 17059
Telephone: 717.436.8200 Fax: 717.436-8205
Branch Office: 33 W. Third Street ♦ Lewistown, PA 17044
Telephone: 717.248.9753 Fax: 717.248-3199
www.hower.cc

July 5, 2018

Mr. Tom Golleck
158 Farm Lane
Thompstontown, Pa. 17094

RE: CMA for 158 Farm Lane

I am enclosing a CMA for Referenced property. I have also enclosed a data sheet for the property at 10279 Route 35 S due to the data sheet in Multi-list generated comparsion did not have a photo for some reason.

Based on this data I would suggest 158 Farm Lane could be listed at a high of \$179,000.00. A low would be 159,000.00. One would expect it to close at 93 to 95 % of list. Tom and I discussed some to the curb appeal issues. Also the basement has some work to be done also. It would be most likely advisable to not list at the high end.

Thank you for the opportunity to assist in this way. Please contact me with any questions.

Sincerely,

J. Allen Zendt, Realtor
717-994-3840
allen@howerre.com

MLS #: R24773S (Sold) List Price: \$188,000

10279 Route 35 S Honey Grove, PA 17035

Sold Price: \$150,000

Sold Date: 3/19/2018



Bedrooms: 3
 Total Baths: 2
 Total Full Baths: 2
 Total Half Baths: 0
 Year Built: 1970
 House Age: 47
 Total AG SqFt: 1640
 Total BG SqFt: 1640
 Finished BG SqFt: 0
 New Construction:

For Sale or Lease: For Sale
 Unit #:
 County: Juniata
 Township/Borough: Tuscarora
 Elementary School: Lack-Tuscarora
 Middle School: Tuscarora
 High School: Juniata High School
 Apx Acres: 7.2
 Lot SqFt:
 Frontage Ft:
 Depth Ft:
 Zoning: None
 Flood Zone: C or X

Parcel #: J-16-10-014; 021 & 032

Deed Book/Page: 136/050

Assoc Fee:

Assessments:

Terms:

Assessed Value: 27560

City/Municipal Taxes:

School Taxes:

Taxes: 2393.00

Tax Year: 2017

Assoc Fee:

Legal: DB 142/845; 144/089

Garage Stalls: 2

Garage SqFt: 528

Garage: Attached

Driveway: Asphalt, Gravel

Street Access: Public

Exterior Property Features: Rural, Wooded

Floor/Level	Room	Size	Description/Special Features
Main	Living		Hardwood, FP w/insert
Main	Dining		Hardwood, Slider to screen porch
Main	Kitchen		
Main	Laundry		Mudroom, Garage entry
Main	Master Bedroom		Hardwood
Main	Master Bath		Tile, Vinyl, Shower
Main	Bedroom		Hardwood
Main	Bedroom		Hardwood
Main	Full Bath		Tile, Vinyl

Fireplaces: 0

Fireplace Fuel: Wood

Wood Stove: 1

Stove Fuel: Wood

Amenities: Fireplace-Stone, Garage Door Opener, Master Bath, Mudroom, Porch-Covered

House Style: Ranch

Exterior: Aluminum

Roof: Asphalt Shingle

Basement Details: Full Basement Unfinished

Attic: Scuttle

Sewer Type: On Site

Water Type: Private Well

Water Softener: None

A/C Type: Window

Heat Type: Radiant (Ceiling)

Fuel Type: Electric

Description/Public Comments: Craving Privacy? Serene, private wooded setting brings nature to your door. 7.2 acres. Spacious ranch affords you a forever home. Well-maintained but retains original character. Beautiful hardwood floors. Plaster ceilings. Plaster, panel walls. 2-car attached garage. Great rear screened porch invites entertaining. This parcel is wooded & wildlife is noted as being abundant. Need more land or living space? Adjoining 520 SF cabin on 2.91 acres is offered for sale. Great in-law possibility!

Included: Stove, Refrigerator, Dishwasher, Washer & Dryer, Freezer, Small Freezer, Air Conditioner, Basement Refrigerator

Not Included:

Instructions/Directions: Rt 35 S approx 15 miles to Anderson Ridge, property on R

Information Herein Deemed Reliable but Not Guaranteed

MLS #: R24773S

Prepared For
Tom Golleck
158 Farm Lane
Thompsontown, Pa. 17094

Prepared By
Allen Zendt
Jack Gaughen Network Services Hower & Associates
(717) 994-3840
(717) 994-3840

	Statistics (4 listings)				
	Low	High	Average	Median	Total
List Price	\$144,900	\$188,000	\$166,825	\$167,200	\$667,300
Selling Price	\$140,000	\$174,500	\$155,625	\$154,000	\$622,500
Sold/List(%)	79.79%	100.00%	93.80%	97.72%	--
Price/SqFt (\$)	\$91.46	\$141.64	\$114.29	\$112.00	--
Days on Market	2	120	52	43.5	--

MLS #: R24773S (Sold) List Price: \$188,000

10279 Route 35 S Honey Grove, PA 17035

SOLD PRICE: \$150,000 **SOLD DATE:** 3/19/2018 **FINANCING:** Conventional **SALE TYPE:** Arms Length
BUYER NAME: Fry, Derek & Caitlin **SELLER CONCESSION:** None
SELLING OFFICE NAME: Jack Gaughen Network Services Hower & Associates (#:1) **SELLING AGENT NAME:** Brittne Davidson (#:46)
ADDITIONAL SOLD NOTES: None

**No Photo
Available**

BEDROOMS: 3
TOTAL BATHS: 2
YEAR BUILT: 1970
HOUSE AGE: 47
TOTAL AG SQFT: 1640
TOTAL BG SQFT: 1640
FINISHED BG SQFT: 0
HOUSE STYLE: Ranch
BASEMENT: Walk-up
GARAGE STALLS: 2
GARAGE: Attached
NEW CONSTRUCTION:

FOR SALE OR LEASE: For Sale
UNIT #:
COUNTY: Juniata
TOWNSHIP/BOROUGH: Tuscarora
ELEMENTARY SCHOOL: Lack-Tuscarora
MIDDLE SCHOOL: Tuscarora
HIGH SCHOOL: Juniata High School
APX ACRES: 7.2
LOT SQFT:
FRONTAGE FT:
DEPTH FT:
ZONING: None
FLOOD ZONE: C or X

PARCEL #: J-16-10-014; 021 & 032

ASSESSMENTS:

CITY/MUNICIPAL TAXES:
LEGAL: DB 142/845; 144/089

TERMS:
SCHOOL TAXES:

DEED BOOK/PAGE: 136/050
ASSESSED VALUE: 27560
TAXES: 2393 **TAX YEAR:** 2017

ASSOC FEE:

TOTAL FULL BATHS: 2

TOTAL HALF BATHS: 0

GARAGE SQFT: 528

DRIVEWAY: Asphalt, Gravel

STREET ACCESS: Public

EXTERIOR PROPERTY FEATURES: Rural, Wooded

Floor/Level:	Room:	Size:	Description/Special Features:
Main	Living		Hardwood, FP w/insert
Main	Dining		Hardwood, Slider to screen porch
Main	Kitchen		
Main	Laundry		Mudroom, Garage entry
Main	Master Bedroom		Hardwood
Main	Master Bath		Tile, Vinyl, Shower
Main	Bedroom		Hardwood
Main	Bedroom		Hardwood
Main	Full Bath		Tile, Vinyl

FIREPLACES: 0

WOOD STOVE: 1

AMENITIES: Fireplace-Stone, Garage Door Opener, Master Bath, Mudroom, Porch-Covered

EXTERIOR: Aluminum

ROOF: Asphalt Shingle

BASEMENT DETAILS: Full Basement Unfinished

ATTIC: Scuttle

WATER SOFTENER: None

POSSESSION: Settlement

OWNER NAME: Doyle, Joyce & Deb POA

TYPE LISTING: Exclusive Right to Sell

AGENT OWNED: No **MIN COMM:**

SUB AGENT: Yes **SA COMM:** 3.0 **SA DUAL/VAR RATE:** No

CONTINGENCY: None

KEY LOCATION: Lockbox

FIREPLACE FUEL: Wood

STOVE FUEL: Wood

A/C TYPE: Window

HEAT TYPE: Radiant (Ceiling)

FUEL TYPE: Electric

WATER TYPE: Private Well

SEWER TYPE: On Site

OCCUPANCY: Vacant

OWNERSHIP: Single Family
OWNER PHONE: Call agent

BA COMM: 3.0 **BA DUAL/VAR RATE:** No
NON AGENT: No **NA COMM:** 0 **NA DUAL/VAR RATE:** No

DISTRESSED PROPERTY: Not Applicable

INCLUDED: Stove, Refrigerator, Dishwasher, Washer & Dryer, Freezer, Small Freezer, Air Conditioner, Basement Refrigerator

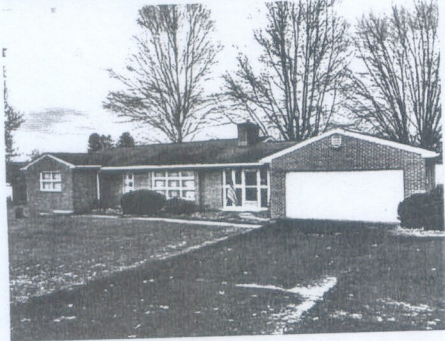
NOT INCLUDED:

INSTRUCTIONS/DIRECTIONS: Rt 35 S approx 15 miles to Anderson Ridge, property on R

AGENT COMMENTS:

Case 1:18-bk-03319-HWV Doc 12 Filed 08/14/18 Entered 08/14/18 08:55:28 Desc Main Document Page 18 of 48

26493 Route 75 N Mifflintown, PA 17059

MLS #: R24881S (Sold) List Price: \$144,900**SOLD PRICE:** \$140,000**SOLD DATE:** 5/4/2018**FINANCING:** FHA**SALE TYPE:** Arms Length**BUYER NAME:** Ewell, Christopher & Leilani**SELLER CONCESSION:** none**SELLING OFFICE NAME:** Century 21 Above and Beyond (#19)**SELLING AGENT NAME:** Michael Smith (#27)**ADDITIONAL SOLD NOTES:** None

BEDROOMS: 3
TOTAL BATHS: 1.1
YEAR BUILT: 1955
HOUSE AGE: 62
TOTAL AG SQFT: 1328
TOTAL BG SQFT: 1328
FINISHED BG SQFT: 664
HOUSE STYLE: Ranch
BASEMENT: Walk-up
GARAGE STALLS: 2
GARAGE: Attached
NEW CONSTRUCTION: No

FOR SALE OR LEASE: For Sale
UNIT #:
COUNTY: Juniata
TOWNSHIP/BOROUGH: Walker
ELEMENTARY SCHOOL: Walker Township
MIDDLE SCHOOL: Tuscarora
HIGH SCHOOL: Juniata High School
APX ACRES: 0.65
LOT SQFT:
FRONTAGE FT:
DEPTH FT:
ZONING: Agriculture, Rural
FLOOD ZONE: C or X

PARCEL #: J-17-01-026**DEED BOOK/PAGE:** 114/41**ASSESSMENTS:****TERMS:****ASSESSED VALUE:** 23530**CITY/MUNICIPAL TAXES:****TAXES:** 2043**TAX YEAR:** 2017**ASSOC FEE:****LEGAL:****TOTAL FULL BATHS:** 1**TOTAL HALF BATHS:** 1**GARAGE SQFT:****DRIVEWAY:** Asphalt**STREET ACCESS:** Public**EXTERIOR PROPERTY FEATURES:** Level

Floor/Level:	Room:	Size:	Description/Special Features:
1	Living Room		Fireplace w/insert
1	Kitchen		Breakfast bar
1	Dining		Carpet
1	Bedroom		Carpet
1	Bedroom		Carpet
1	Bedroom		Carpet
1	Half Bath		
1	Full Bath		Tile
1	Breezeway		Brick Barbecue

FIREPLACES: 1

FIREPLACE FUEL: Wood Insert

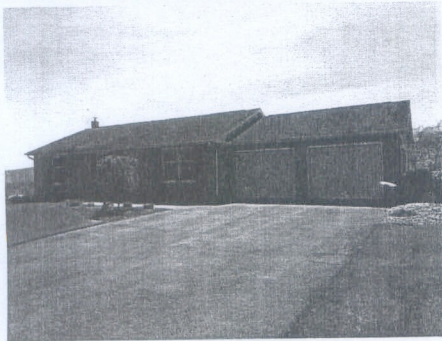
WOOD STOVE: 1

STOVE FUEL: None**AMENITIES:** 3 Season Porch, Breezeway, Fireplace-Brick, Garage Door Opener, Hardwood Floors, Outbuildings**EXTERIOR:** Brick**A/C TYPE:** None**ROOF:** Asphalt Shingle**HEAT TYPE:** Radiator**BASEMENT DETAILS:** Partial Basement Unfinished**FUEL TYPE:** Oil**ATTIC:** Scuttle**WATER TYPE:** Private Well**WATER SOFTENER:** None**SEWER TYPE:** On Site**POSSESSION:** Settlement**OCCUPANCY:** Vacant**OWNERSHIP:** Single Family**OWNER NAME:** Moyer, Blanche**OWNER PHONE:** Call agent**TYPE LISTING:** Exclusive Right to Sell**AGENT OWNED:** No**MIN COMM:****BONUS:** 0**BUYER AGENT:** Yes**BA COMM:** 2.5**BA DUAL/VAR RATE:** No**SUB AGENT:** Yes**SA COMM:** 2.5**SA DUAL/VAR RATE:** No**NON AGENT:** No**NA COMM:** 0**NA DUAL/VAR RATE:** No**CONTINGENCY:** None**KEY LOCATION:** Lockbox**DISTRESSED PROPERTY:** Not Applicable**INCLUDED:** Bar stools, Appliances, Pool Table is negotiable**NOT INCLUDED:**

INSTRUCTIONS/DIRECTIONS: From redlight at William Pen Hwy & Industrial Park Rd, R/Rt 75 S. House on R before River Rd interstecion
AGENT COMMENTS: The house is removed from the flood plain - see attached LOMA Letter. A portion of the land remains in flood plain. House is vacant, electricity is on.

DESCRIPTION/PUBLIC COMMENTS: This very well maintained all brick ranch home is awaiting only it's second family to call it home. Large level lot, pavilion and enclosed breezeway with brick barbecue invite family gatherings and outdoor entertaining. A large basement recreation area with wet bar brings the party inside or create a sports or gaming area. Hardwood floors under the carpet. Home shows pride of ownership!

DISPLAY ON INTERNET: Yes**DISPLAY ADDRESS:** Yes**ALLOW AVM:** No**ALLOW COMMENTS:** No**ORIGINAL LIST PRICE:** \$148,000**LIST DATE:****EXPIRE DATE:****PENDING DATE:** 3/9/2018**DAYS ON MARKET:** 82**PENDING OFFICE:** Century 21 Above and Beyond (#19)**PENDING AGENT:** Smith, Michael (# 19/27)**Office Name:** Jack Gaughen Network Services Hower & Associates (#1)**Listing Agent:** Dan Martin (#12)**Main:** (717) 436-8200**Contact #:** (888) 436-820**Fax:** (717) 436-8205**Agent Email:** dan@hower.cc **License Number:** RS210858L**Office Corporate License:** RB061685L

MLS #: R25138S (Sold) List Price: \$174,500**52 McGeary Road Thompsontown, PA 17094****SOLD PRICE:** \$174,500**SOLD DATE:** 6/29/2018**FINANCING:** VA**SALE TYPE:** Arms Length**BUYER NAME:** Walker, Jolene C.**SELLER CONCESSION:** None**SELLING OFFICE NAME:** zz Non Office (#:16)**SELLING AGENT NAME:** Non zz Agent (#:1)**ADDITIONAL SOLD NOTES:** None

BEDROOMS: 2
TOTAL BATHS: 1
YEAR BUILT: 1997
HOUSE AGE: 21
TOTAL AG SQFT: 1232
TOTAL BG SQFT: 1232
FINISHED BG SQFT: 1100
HOUSE STYLE: Ranch
BASEMENT: Walk-out
GARAGE STALLS: 2
GARAGE: Attached
NEW CONSTRUCTION:

FOR SALE OR LEASE: For Sale
UNIT #:
COUNTY: Juniata
TOWNSHIP/BOROUGH: Delaware
ELEMENTARY SCHOOL: Thompsontown
MIDDLE SCHOOL: East Juniata
HIGH SCHOOL: East Juniata
APX ACRES: 0.6
LOT SQFT:
FRONTAGE FT:
DEPTH FT:
ZONING: Residential
FLOOD ZONE: C or X

PARCEL #: 02-3A-26**DEED BOOK/PAGE:** 425-649**ASSESSMENTS:****TERMS:****ASSESSED VALUE:** 22840**CITY/MUNICIPAL TAXES:** 571**SCHOOL TAXES:** 1429**TAXES:** 2000**TAX YEAR:** 2018**ASSOC FEE:****LEGAL:** 425-649**TOTAL FULL BATHS:** 1**TOTAL HALF BATHS:** 0**GARAGE SQFT:** 576**DRIVEWAY:** Asphalt**STREET ACCESS:** Public**EXTERIOR PROPERTY FEATURES:** Deed Restrictions, Development, Mountain Views, Mountainous, Open

Floor/Level:	Room:	Size:	Description/Special Features:
Main	Kitchen	13x10	hardwood fl, stove, fridge, dishwasher, disposal
Main	Living Room	13x10	carpet
Main	Dining Room	15x13	hardwood floor leads to cozy sun room
Main	Bedroom #1	15x13	hardwood floor
Main	Bedroom #2	13x11	hardwood floor
Main	full bath	10x6	vinyl, linen closet
lower	half bath	5x5	vinyl floor, panel walls
lower	family	30x22	panel walls, tile ceiling
lower	laundry	10x10	washer & dryer reserved
lower	3rd bedroom/den	10x12	tile floor, panel/block walls

FIREPLACES:**FIREPLACE FUEL:** None**# WOOD STOVE:** 1**STOVE FUEL:** Pellet

AMENITIES: Attic, Cable Ready, Ceiling Fan, Central Vac, Furnace Room, Garage Door Opener, Hardwood Floors, Pantry, Pellet Stove, Smoke Detectors, Walk-in Closet, Walk-out Basement

EXTERIOR: Brick & Vinyl**A/C TYPE:** Central**ROOF:** Asphalt Shingle**HEAT TYPE:** Forced Warm Air, Heat Pump**BASEMENT DETAILS:** Full Basement Partially Finished**FUEL TYPE:** Electric**ATTIC:** Scuttle**WATER TYPE:** Municipal**WATER SOFTENER:** None**SEWER TYPE:** Municipal**POSSESSION:** At Closing**OCCUPANCY:** Owner**OWNERSHIP:** Single Family**OWNER NAME:** Weibley, Nancy L.**OWNER PHONE:** 717.994.1184**TYPE LISTING:** Exclusive Right to Sell**AGENT OWNED:** No**MIN COMM:****BONUS:** 0**BUYER AGENT:** Yes**BA COMM:** 3**BA DUAL/VAR RATE:** No**SUB AGENT:** No**SA COMM:** 0**SA DUAL/VAR RATE:** No**NON AGENT:** Yes**NA COMM:** 3**NA DUAL/VAR RATE:** No**CONTINGENCY:** None**KEY LOCATION:** Lockbox**DISTRESSED PROPERTY:** Not Applicable**INCLUDED:** range, fridge, microwave, dishwasher, dehumidifier, Harmon Pellet Stove, pellet bags, garbage disposal**NOT INCLUDED:** washer, dryer and all other personal items (owner will sell riding mower)**INSTRUCTIONS/DIRECTIONS:****AGENT COMMENTS:**

DESCRIPTION/PUBLIC COMMENTS: Immaculate 2 bedroom home conveniently located just mins from Rte 322 at Thompsontown. Pride of ownership shows inside and out - you will NOT be disappointed! Neat as a pin & ready to move in. Lg finished LL includes family room, half bath, laundry, 3rd bedroom potential and lots of storage. First floor sun room, large open kitchen with new counter tops and hardware, spacious dining area, new exterior doors, large pantry, Harmon Pellet Stove (P68) heats this home for \$800/year!! Hurry to see this home cause it is like new without the hassle.

DISPLAY ON INTERNET: Yes**DISPLAY ADDRESS:** Yes**ALLOW AVM:** No**ALLOW COMMENTS:** No**ORIGINAL LIST PRICE:** \$174,500**LIST DATE:** **EXPIRE DATE:****PENDING DATE:** 5/11/2018**DAYS ON MARKET:** 5**PENDING OFFICE:** A Non MLS Office**PENDING AGENT:** A Non MLS Agent**Office Name:** Century 21 Above and Beyond (#:19)**Listing Agent:** Gayle Arbogast (#:1)**Main:** (717) 436-9191**Contact #:** (717) 994-1184**Fax:** (717) 436-9134**Agent Email:** glarbogast@aol.com **License Number:** SB065377**Office Corporate License:** SB065377

Subject: Fwd: 1809 Willow St. Carlisle
From: "Harter, Rochelle" <rharter@pa.gov>
Date: 7/12/2018 12:57 PM
To: "dabsheppardlaw@comcast.net" <dabsheppardlaw@comcast.net>

Mr. Sheppard,

The estimates of selling price may be accurate, however the rehab amount we disagree. We believe the estimate for rehab would be 3500-5000 including labor. We already have someone who will do the rehab for this price range to help Tom.

Tom can discuss that further with you if there are any questions.

Thank you

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From: Fred C. Noye <fred@howerre.com>
Sent: Wednesday, July 11, 2018 10:07:07 PM
To: Harter, Rochelle
Subject: 1809 Willow St. Carlisle

Tom: After doing a search of sales in the multi-list, i have concluded through my market analysis that the home on Willow St. would list in the \$72,000-\$78,000 range if it were totally re-habed. It needs new flooring, new windows and a total replacement of the kitchen appliances and cabinets. It would take \$15,000-\$20,000 (not counting labor) to get it marketable.

Sold as is ---I would estimate it would sell in the \$30,000-\$36,000 range.

I hope this gives you some numbers that are helpful to make a decision. If you have questions or need any further assistance, please feel free to contact me.

Fred Noye
agent, Hower & Assoc.

Fill in this information to identify your case:

Debtor 1	Thomas Niles Gollick, Sr.		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF PENNSYLVANIA, HARRISBURG DIVISION		
Case number (if known)	1:18-bk-03319		

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

☒ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
158 Farm Dr Thompsontown PA, 17094-8963 County : Juniata Line from <i>Schedule A/B</i> : 1.1	\$71,550.00	<input checked="" type="checkbox"/> \$23,675.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(1)
2013 Chevy Silverado Truck 94,000 Miles - Fair Condition Line from <i>Schedule A/B</i> : 3.1	\$17,307.00	<input checked="" type="checkbox"/> \$3,775.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(2)
Refrigerator/Freezer \$150.00; Stove \$100.00; Dishwasher \$75.00; Table and Chairs \$100.00; TV \$50.00; Bed, Dresser, Chest of Drawers \$200.00; Filing Cabinet \$20.00; Recliner \$10.00; Tool Box with Tools \$100.00; Lawn Tractor \$500.00; Yard Tools \$40.00; Hand Line from <i>Schedule A/B</i> : 6.1	\$1,745.00	<input checked="" type="checkbox"/> \$1,745.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Cell Phone Line from <i>Schedule A/B</i> : 7.1	\$100.00	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Clothing and Wearing Apparel Line from Schedule A/B: 11.1	<u>\$150.00</u>	<input checked="" type="checkbox"/> <u>\$150.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Miscellaneous Jewelry Line from Schedule A/B: 12.1	<u>\$20.00</u>	<input checked="" type="checkbox"/> <u>\$20.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(4)
Cash and Coin Line from Schedule A/B: 16.1	<u>\$10.00</u>	<input checked="" type="checkbox"/> <u>\$10.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)
Checking Account-Joint Line from Schedule A/B: 17.1	<u>\$9,074.22</u>	<input checked="" type="checkbox"/> <u>\$1,250.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)

3. **Are you claiming a homestead exemption of more than \$160,375?**

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

☒ No

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ No

☐ Yes

Fill in this information to identify your case:

Debtor 1	Thomas Niles Gollick, Sr.		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF PENNSYLVANIA, HARRISBURG DIVISION		
Case number (if known)	1:18-bk-03319		

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Bank of America Creditor's Name	\$7,825.28	\$36,000.00	\$0.00
Describe the property that secures the claim: 1st Mortgage Rental			
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)			
Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt			
Date debt was incurred _____ Last 4 digits of account number 2305			

2.2 Citizens One Finance Creditor's Name	\$8,252.00	\$17,307.00	\$0.00
Describe the property that secures the claim: 2013 Chevy Silverado Truck			
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)			
Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt			
Date debt was incurred _____ Last 4 digits of account number 9639			

Debtor 1 **Thomas Niles Gollick, Sr.**

First Name

Middle Name

Last Name

Case number (if known)

1:18-bk-03319**2.3****Nancy E Diem Delaware
Twp Tax Collector**

Creditor's Name

**549 Jones Rd
Mifflintown, PA
17059-8530**

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

**158 Farm Dr, Thompsontown, PA
17094-8963
Real estate at and known as 158
Farm Drive, Thompsontown,
Juniata County, Pennsylvania
17094, used as residence. Property
purchased for \$120,000.00 on
January 16, 2014, CMA by Hower
and Associates i**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit

☒ Other (including a right to offset) **2017 and 2018 Real Estate Taxes**

Date debt was incurred

Last 4 digits of account number **0811****2.4****One Main**

Creditor's Name

**PO Box 742536
Cincinnati, OH
45274-2536**

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

2nd Mortgage Rental

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset)

Date debt was incurred

Last 4 digits of account number **6673****2.5****Pennian Bank**

Creditor's Name

**2 N Main St
Mifflintown, PA
17059-1003**

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

1st Mortgage

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

- ☐ Check if this claim relates to a community debt

Debtor 1 **Thomas Niles Gollick, Sr.** Case number (if known) **1:18-bk-03319**
First Name Middle Name Last Name

☐ Check if this claim relates to a community debt ☐ Other (including a right to offset)

Date debt was incurred **02/28/2014** Last 4 digits of account number **8804**

Add the dollar value of your entries in Column A on this page. Write that number here: **\$133,122.45**
If this is the last page of your form, add the dollar value totals from all pages.
Write that number here: **\$133,122.45**

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

☐ Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? **2.3**
Juniata Tax Claim Bureau
PO Box 68 Last 4 digits of account number **0811**
Mifflintown, PA 17059-0068

Fill in this information to identify your case:

Debtor 1	Thomas Niles Gollick, Sr.		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF PENNSYLVANIA, HARRISBURG DIVISION		
Case number (if known)	1:18-bk-03319		

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

☐ No. Go to Part 2.

☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

			Total claim	Priority amount	Nonpriority amount
2.1	Internal Revenue Service Priority Creditor's Name	Last 4 digits of account number 8632	\$7,704.00	\$7,704.00	\$0.00
	PO Box 37007 Hartford, CT 06176-7007 Number Street City State Zip Code	When was the debt incurred? _____			
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____			
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Federal Income Taxes Owed

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

☒ Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

4.1

Care Credit Synchrony Bank

Nonpriority Creditor's Name

Last 4 digits of account number **1617****\$165.00**

When was the debt incurred?

PO Box 960061**Orlando, FL 32896-0061**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Credit Account**

4.2

Cavalry SPV I, LLC (Citibank, N.A.)

Nonpriority Creditor's Name

Last 4 digits of account number **4311****\$13,257.93**

When was the debt incurred?

500 Summit Lake Dr Ste 400**Valhalla, NY 10595-1340**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Credit Account - Suit Filed**

4.3

Chase Bank

Nonpriority Creditor's Name

Last 4 digits of account number

\$3,000.00

When was the debt incurred?

PO Box 15298**Wilmington, DE 19850-5298**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Credit Account**

4.4

Citi Cards Processing Center

Nonpriority Creditor's Name

Last 4 digits of account number **0177****\$3,993.53**

When was the debt incurred?

Box 6500**Sioux Falls, SD 57117**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Credit Account**

4.5

Geisinger

Nonpriority Creditor's Name

Last 4 digits of account number

\$51.44

When was the debt incurred?

PO Box 27727**Newark, NJ 07101-7727**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Medical Bill**

4.6

Geisinger Lewistown Hospital

Nonpriority Creditor's Name

Last 4 digits of account number

\$180.00

When was the debt incurred?

PO Box 983140**Boston, MA 02298-3140**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Medical Bill**

4.7

Herschel Lock

Nonpriority Creditor's Name

Last 4 digits of account number

\$5,000.00**3107 N Front St Ste 200
Harrisburg, PA 17110-1343**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Attorney Fees**

4.8

Holy Spirit Hospital

Nonpriority Creditor's Name

Last 4 digits of account number

4068**\$50.00****PO Box 822183
Philadelphia, PA 19182-2183**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Medical Bill**

4.9

Holy Spirit Medical Group

Nonpriority Creditor's Name

Last 4 digits of account number

\$105.64**PO Box 983143
Boston, MA 02298-3143**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Medical Bill**

4.10

Kay Jewelers

Nonpriority Creditor's Name

Last 4 digits of account number

\$2,241.00**375 Ghent Rd
Fairlawn, OH 44333-4601**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Credit Account**

4.11

Lowes

Nonpriority Creditor's Name

Last 4 digits of account number

5255**\$511.23****PO Box 530914
Atlanta, GA 30353-0914**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Credit Account**

4.12

McKesson Patient Care Solutions

Nonpriority Creditor's Name

Last 4 digits of account number

\$3,121.00**PO Box 645034
Pittsburgh, PA 15264-5034**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Medical Bill**

<div>4.13</div> MSHMC Physicians Group Nonpriority Creditor's Name PO Box 643313 Pittsburgh, PA 15264-3313 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>7151</u> \$40.00 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bills</u>
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<div>4.14</div> PennState Hershey Medical Center Nonpriority Creditor's Name PO Box 643291 Pittsburgh, PA 15264-3291 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>unts</u> \$100.00 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bills</u>
---	---

<div>4.15</div> Pinnacle Health Emergency Nonpriority Creditor's Name PO Box 826813 Philadelphia, PA 19182-6813 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>unts</u> \$308.00 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bills</u>
--	---

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 **Gollick, Thomas Niles Sr.**Case number (if known) **1:18-bk-03319**

Name and Address

**David J Apothaker Esquire
520 Fellowship Rd Ste C306
Mount Laurel, NJ 08054-3410**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.2** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

4311

Name and Address

**ERC
PO Box 23870
Jacksonville, FL 32241-3870**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.11** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

5255**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

			Total Claim
Total claims from Part 1	6a. Domestic support obligations	6a.	\$ <u>0.00</u>
	6b. Taxes and certain other debts you owe the government	6b.	\$ <u>7,704.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$ <u>0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ <u>0.00</u>
	6e. Total Priority. Add lines 6a through 6d.	6e.	\$ <u>7,704.00</u>
Total claims from Part 2	6f. Student loans	6f.	\$ <u>0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ <u>0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ <u>0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ <u>32,124.77</u>
	6j. Total Nonpriority. Add lines 6f through 6i.	6j.	\$ <u>32,124.77</u>

Fill in this information to identify your case:

Debtor 1	Thomas Niles Gollick, Sr.		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF PENNSYLVANIA, HARRISBURG DIVISION		
Case number (if known)	1:18-bk-03319		

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	
2.2	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	
2.3	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	
2.4	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	
2.5	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	

Fill in this information to identify your case:

Debtor 1	Thomas Niles Gollick, Sr.		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF PENNSYLVANIA, HARRISBURG DIVISION		
Case number (if known)	1:18-bk-03319		

☐ Check if this is an amended filing

Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

- ☐ No
☒ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No. Go to line 3.
☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor
Name, Number, Street, City, State and ZIP Code

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.1 **Rochelle K. Harter**
158 Farm Dr
Thompsontown, PA 17094-8963

☒ Schedule D, line 2.3
☐ Schedule E/F, line _____
☐ Schedule G _____
Nancy E Diem Delaware Twp Tax Collector

3.2 **Rochelle K. Harter**
158 Farm Dr
Thompsontown, PA 17094-8963

☒ Schedule D, line 2.5
☐ Schedule E/F, line _____
☐ Schedule G _____
Pennian Bank

Fill in this information to identify your case:

Debtor 1 Thomas Niles Gollick, Sr.

Debtor 2
(Spouse, if filing)

United States Bankruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA,
HARRISBURG DIVISION

Case number 1:18-bk-03319
(If known)

Check if this is:

- ☐ An amended filing
☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. **Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

How long employed there?

Debtor 1

- ☐ Employed
☒ Not employed

Debtor 2 or non-filing spouse

- ☒ Employed
☐ Not employed

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. **List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. **Estimate and list monthly overtime pay.**

4. **Calculate gross income.** Add line 2 + line 3.

For Debtor 1

For Debtor 2 or non-filing spouse

2. \$ 0.00 \$ 0.00

3. +\$ 0.00 +\$ 0.00

4. \$ 0.00 \$ 0.00

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4. \$ 0.00	\$ 0.00
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$ 0.00
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$ 0.00	\$ 0.00
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify:	5h.+ \$ 0.00	+ \$ 0.00
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ 0.00	\$ 0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 0.00	\$ 0.00
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ 0.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 2,107.00	\$ 0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 664.00	\$ 0.00
8h. Other monthly income. Specify: Thrift Savings Plan	8h.+ \$ 500.00	+ \$ 0.00
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ 3,271.00	\$ 0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 3,271.00 + \$ 0.00 = \$ 3,271.00	
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: Companion Contribution		
		11. +\$ 773.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	12. \$ 4,044.00	Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain:		

Fill in this information to identify your case:

Debtor 1 Thomas Niles Gollick, Sr.

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA,
HARRISBURG DIVISION

Case number 1:18-bk-03319
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

☒ No. Go to line 2.

☐ Yes. Does Debtor 2 live in a separate household?

☐ No

☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents? ☒ No

Do not list Debtor 1 and Debtor 2.

☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Do not state the dependents names.

- ☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☐ No ☒ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 499.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 226.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 60.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 120.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

6. Utilities:	
6a. Electricity, heat, natural gas	6a. \$ <u>265.00</u>
6b. Water, sewer, garbage collection	6b. \$ <u>44.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>260.00</u>
6d. Other. Specify: _____	6d. \$ <u>0.00</u>
7. Food and housekeeping supplies	7. \$ <u>650.00</u>
8. Childcare and children's education costs	8. \$ <u>0.00</u>
9. Clothing, laundry, and dry cleaning	9. \$ <u>250.00</u>
10. Personal care products and services	10. \$ <u>150.00</u>
11. Medical and dental expenses	11. \$ <u>120.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ <u>529.00</u>
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$ <u>150.00</u>
14. Charitable contributions and religious donations	14. \$ <u>21.00</u>
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	15a. \$ <u>0.00</u>
15b. Health insurance	15b. \$ <u>0.00</u>
15c. Vehicle insurance	15c. \$ <u>92.00</u>
15d. Other insurance. Specify: _____	15d. \$ <u>0.00</u>
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ <u>0.00</u>
17. Installment or lease payments:	
17a. Car payments for Vehicle 1	17a. \$ <u>194.33</u>
17b. Car payments for Vehicle 2	17b. \$ <u>0.00</u>
17c. Other. Specify: _____	17c. \$ <u>0.00</u>
17d. Other. Specify: _____	17d. \$ <u>0.00</u>
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$ <u>0.00</u>
19. Other payments you make to support others who do not live with you. Specify: _____	19. \$ <u>0.00</u>
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a. Mortgages on other property	20a. \$ <u>0.00</u>
20b. Real estate taxes	20b. \$ <u>0.00</u>
20c. Property, homeowner's, or renter's insurance	20c. \$ <u>0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d. \$ <u>0.00</u>
20e. Homeowner's association or condominium dues	20e. \$ <u>0.00</u>
21. Other: Specify: _____	21. +\$ <u>0.00</u>
22. Calculate your monthly expenses	
22a. Add lines 4 through 21.	\$ <u>3,630.33</u>
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$ _____
22c. Add line 22a and 22b. The result is your monthly expenses.	\$ <u>3,630.33</u>
23. Calculate your monthly net income.	
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$ <u>4,044.00</u>
23b. Copy your monthly expenses from line 22c above.	23b. -\$ <u>3,630.33</u>
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$ <u>413.67</u>
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?	
<input checked="" type="checkbox"/> No.	
<input type="checkbox"/> Yes. Explain here: _____	

Fill in this information to identify your case:

Debtor 1 Thomas Niles Gollick, Sr.
First Name Middle Name Last Name

Debtor 2
(Spouse if, filing) _____
First Name Middle Name Last Name

United States Bankruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA, HARRISBURG
DIVISION

Case number 1:18-bk-03319
(if known)

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Thomas Niles Gollick, Sr.
Thomas Niles Gollick, Sr.
Signature of Debtor 1

Date July 27, 2018

X _____
Signature of Debtor 2

Date _____

United States Bankruptcy Court
Middle District of Pennsylvania, Harrisburg Division

In re **Gollick, Thomas Niles Sr.**

Debtor(s)

Case No. **1:18-bk-03319**Chapter **13**

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	<u>4,000.00</u>
Prior to the filing of this statement I have received	\$	<u>4,000.00</u>
Balance Due	\$	<u>0.00</u>

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

See Paragraph 6 below with regard to the attorney time limit for necessary legal services.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Necessary attorney time past confirmation will be billed at a rate of \$250.00 per hour plus costs.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

July 27, 2018

Date

/s/ James P. Sheppard

James P. Sheppard

Signature of Attorney

James P. Sheppard, Esquire

2201 N 2nd St

Harrisburg, PA 17110-1007

Name of law firm

Bank of America
PO Box 31785
Tampa, FL 33631-3785

Care Credit Synchrony Bank
PO Box 960061
Orlando, FL 32896-0061

Cavalry SPV I, LLC (Citibank, N.A.)
500 Summit Lake Dr Ste 400
Valhalla, NY 10595-1340

Chase Bank
PO Box 15298
Wilmington, DE 19850-5298

Citi Cards Processing Center
Box 6500
Sioux Falls, SD 57117

Citizens One Finance
1 Citizens Dr
Riverside, RI 02915-3026

David J Apothaker Esquire
520 Fellowship Rd Ste C306
Mount Laurel, NJ 08054-3410

ERC
PO Box 23870
Jacksonville, FL 32241-3870

Geisinger
PO Box 27727
Newark, NJ 07101-7727

Geisinger Lewistown Hospital
PO Box 983140
Boston, MA 02298-3140

Herschel Lock
3107 N Front St Ste 200
Harrisburg, PA 17110-1343

Holy Spirit Hospital
PO Box 822183
Philadelphia, PA 19182-2183

Holy Spirit Medical Group
PO Box 983143
Boston, MA 02298-3143

Internal Revenue Service
PO Box 37007
Hartford, CT 06176-7007

Juniata Tax Claim Bureau
PO Box 68
Mifflintown, PA 17059-0068

Kay Jewelers
375 Ghent Rd
Fairlawn, OH 44333-4601

Lowe's
PO Box 530914
Atlanta, GA 30353-0914

McKesson Patient Care Solutions
PO Box 645034
Pittsburgh, PA 15264-5034

MSHMC Physicians Group
PO Box 643313
Pittsburgh, PA 15264-3313

Nancy E Diem Delaware Twp Tax Collector
549 Jones Rd
Mifflintown, PA 17059-8530

One Main
PO Box 742536
Cincinnati, OH 45274-2536

Pennian Bank
2 N Main St
Mifflintown, PA 17059-1003

PennState Hershey Medical Center
PO Box 643291
Pittsburgh, PA 15264-3291

Pinnacle Health Emergency
PO Box 826813
Philadelphia, PA 19182-6813

Rochelle K. Harter
158 Farm Dr
Thompsontown, PA 17094-8963

Fill in this information to identify your case:

Debtor 1 Thomas Niles Gollick, Sr.

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: Middle District of Pennsylvania,
Harrisburg Division

Case number 1:18-bk-03319
(if known)

Check as directed in lines 17 and 21:

According to the calculations required by this Statement:

- ☒ 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
- ☐ 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
- ☒ 3. The commitment period is 3 years.
- ☐ 4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

1. What is your marital and filing status? Check one only.

☒ **Not married.** Fill out Column A, lines 2-11.

☐ **Married.** Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ 0.00	\$
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ 0.00	\$
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3	\$ 851.00	\$
5. Net income from operating a business, profession, or farm	Debtor 1	
Gross receipts (before all deductions)	\$ 0.00	
Ordinary and necessary operating expenses	-\$ 0.00	
Net monthly income from a business, profession, or farm	\$ 0.00	Copy here -> \$ 0.00
6. Net income from rental and other real property	Debtor 1	
Gross receipts (before all deductions)	\$ 0.00	
Ordinary and necessary operating expenses	-\$ 0.00	
Net monthly income from rental or other real property	\$ 0.00	Copy here -> \$ 0.00

Column A Debtor 1	Column B Debtor 2 or non-filing spouse
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7. Interest, dividends, and royalties\$ **0.00****8. Unemployment compensation**\$ **0.00**

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you \$ **0.00**

For your spouse \$

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.\$ **3,105.70****10. Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.\$ **0.00**\$ **0.00**

Total amounts from separate pages, if any.

+ \$ **0.00****11. Calculate your total average monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.\$ **3,956.70**

+ \$

\$ **3,956.70**Total average
monthly income**Part 2: Determine How to Measure Your Deductions from Income****12. Copy your total average monthly income from line 11.** \$ **3,956.70****13. Calculate the marital adjustment.** Check one:

- ☒ You are not married. Fill in 0 below.
- ☐ You are married and your spouse is filing with you. Fill in 0 below.
- ☐ You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

.....	\$
.....	\$
.....	+ \$

Total

\$ **0.00**

Copy here=>

- **0.00****14. Your current monthly income.** Subtract line 13 from line 12.\$ **3,956.70****15. Calculate your current monthly income for the year.** Follow these steps:

15a. Copy line 14 here=>

\$ **3,956.70**

Multiply line 15a by 12 (the number of months in a year).

x 12

15b. The result is your current monthly income for the year for this part of the form.

\$ **47,480.40**

16. Calculate the median family income that applies to you. Follow these steps:

- 16a. Fill in the state in which you live. PA
- 16b. Fill in the number of people in your household. 2
- 16c. Fill in the median family income for your state and size of household. \$ 63,687.00
To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

17. How do the lines compare?

- 17a. ☒ Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box *Disposable income is not determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3.** Do NOT fill out *Calculation of Your Disposable Income* (Official Form 122C-2).
- 17b. ☐ Line 15b is more than line 16c. On the top of page 1 of this form, check box *Disposable income is determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2).** On line 39 of that form, copy your current monthly income from line 14 above.

Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)

18. Copy your total average monthly income from line 11. \$ 3,956.70

19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.

19a. If the marital adjustment does not apply, fill in 0 on line 19a. -\$ 0.00

19b. Subtract line 19a from line 18.

\$ 3,956.70

20. Calculate your current monthly income for the year. Follow these steps:

20a. Copy line 19b. \$ 3,956.70

Multiply by 12 (the number of months in a year).

x 12

20b. The result is your current monthly income for the year for this part of the form

\$ 47,480.40

20c. Copy the median family income for your state and size of household from line 16c. \$ 63,687.00

21. How do the lines compare?

- ☒ Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years*. Go to Part 4.
- ☐ Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ Thomas Niles Gollick, Sr.

Thomas Niles Gollick, Sr.

Signature of Debtor 1

Date **July 27, 2018**

MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.